

KONRAD RAYNES & VICTOR, LLP

315 S. Beverly Drive, Suite 210
Beverly Hills, California 90212

Telephone: (310) 556-7983
Facsimile: (310) 556-7984

FAX COVER SHEET

PLEASE DELIVER THIS FACSIMILE TO EXAMINER HUNG Q. PHAM

TO: Commissioner for Patents
Attn: Examiner Hung Q. Pham
Group Art Unit 2172
Patent Examining Corps
Facsimile Center
Washington, D.C. 20231

FROM: David W. Victor

OUR REF: 0021.0002
TELEPHONE: 310-556-7983

Total pages, including cover letter: 12

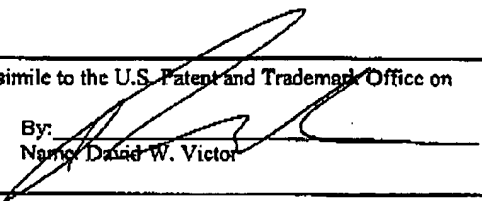
PTO FAX NUMBER 1-703-872-9306

If you do NOT receive all of the pages, please telephone us at 310/556-7983, or fax us at 310/556-7984.

Title of Document Transmitted: RESPONSE TO OFFICE ACTION: TRANSMITTAL

Applicant: A.H. Christofferson et al.
Serial No.: 09/409,613
Filed: October 1, 1999
Group Art Unit: 2172
Docket No.: RO999091

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on
September 17, 2004

By: 
Name: David W. Victor

FORM PTO-1083

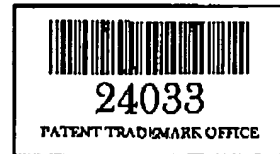
PATENT
R0999091
0021.0002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
A.H. Christofferson et al.
Serial No.: 09/409,813
Filed: October 1, 1999
For: METHOD, SYSTEM, AND PROGRAM
FOR ACCESSING FILES IN A FILE
SYSTEM

Examiner: Hung Q. Pham

Art Unit: 2172



Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith in the above-identified application is an:

☒ Amendment 9 pages.
☒ Return Postcard.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	42	MINUS 45	=	0	x	\$0	OR x 18 \$
INDEP CLAIMS	6	MINUS 6	=	3	x	\$0	OR x 86 \$0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+		\$0	OR + 280 \$
				TOTAL		\$0	OR TOTAL \$0

— Please charge Deposit Account No. 50-0585 the amount of \$___ to cover the extension fee and also the amount of \$___ to cover the claim fee. A duplicate copy of this sheet is enclosed.
— A check in the amount of \$___ to cover the extension fee is enclosed.
— A check in the amount of \$___ to cover the filing fee is enclosed.
— A check in the amount of \$___ to cover the petition fee is enclosed.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0585. A duplicate of this sheet is enclosed.
☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

Dated: September 17, 2004

David W. Victor
Registration No. 39,867
KONRAD RAYNES & VICTOR, LLP
315 S. Beverly Drive, Suite 210
Beverly Hills, CA 90212
(310) 556-7983 (voice)
(310) 556-7984 (fax)

I hereby certify that this correspondence is being transmitted by facsimile to Hung Q. Pham of the U.S. Patent and Trademark Office at 703-872-9308 on September 17, 2004.

David W. Victor

9/17/04
Date